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Name of Workshop, Seminar,  
or Speaking Event \_\_\_\_\_

Sponsoring Group \_\_\_\_\_

Name of Contact Person \_\_\_\_\_ Phone Number \_\_\_\_\_

Fax Number: \_\_\_\_\_ e-mail \_\_\_\_\_

Mailing Address: \_\_\_\_\_

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**MEETING SPECIFICS**

Meeting Location \_\_\_\_\_

\*\*Is meeting date fixed or tentative? \_\_\_\_\_

\*\*Specific content to be covered \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\*\*Specific meeting times \_\_\_\_\_

\_\_\_\_\_

\*\*Actual speaking time during each meeting \_\_\_\_\_

\_\_\_\_\_

Are there other speakers? \_\_\_\_\_ Who? \_\_\_\_\_

Number of attendees expected \_\_\_\_\_ Median age of attendees: \_\_\_\_\_

What is the theme for your event?

\_\_\_\_\_

Are there any special needs you would like us to cover at this seminar?

\_\_\_\_\_

\_\_\_\_\_

**PAYMENT** (Please write a specific U.S. dollar amount) \_\_\_\_\_ \$ \_\_\_\_\_

*The payment check should be made out to ARIEL Connections*

Will payment be given in advance? \_\_\_\_\_ The final day of meetings? \_\_\_\_\_

Special Arrangements needed? \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\*\* Will ARIEL Connections Products related to workshop be purchased? \_\_\_\_\_

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**OVERNIGHT ACCOMMODATIONS**

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Hotel Name: \_\_\_\_\_

Hotel Address: \_\_\_\_\_

Hotel Phone #: \_\_\_\_\_

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**LOGISTICS**

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Can you supply: P.A. System \_\_\_\_\_ Large screen TV or projector \_\_\_\_\_

*Please check all that apply* VCR \_\_\_\_\_ Cordless or lapel microphone \_\_\_\_\_  
CD Player \_\_\_\_\_ Tape Player/Recorder \_\_\_\_\_*Write in any special needs your organization may have* 8' Table \_\_\_\_\_ Photo copies \_\_\_\_\_

Markers \_\_\_\_\_ Blackboard w/chalk &amp; eraser \_\_\_\_\_

Pad &amp; Easel \_\_\_\_\_ Table for ARIEL Products \_\_\_\_\_

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**EXPENSES**

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**Meetings less than 200 miles**

What is mileage from Detroit MI? \_\_\_\_\_ Can you provide a detailed map? \_\_\_\_\_

Current mileage cost per mile times number of miles \_\_\_\_\_

**Meetings more than 200 miles***(Air travel arrangements will be made by ARIEL Connections' office)* \_\_\_\_\_

Air travel is requested in advanced? \_\_\_\_\_

What is length of travel time from airport to meeting place? \_\_\_\_\_

Who will transport to/from airport? *(Print name here)* \_\_\_\_\_

Please provide that person's work and home phone numbers below

Work Number \_\_\_\_\_ Home Number \_\_\_\_\_

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***Thank you for taking the time to fill out this form. It will help ARIEL Connections with preparing a seminar that will be effective in its presentation to your organization.***

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Name of person completing this form \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Work Phone \_\_\_\_\_ Home Phone \_\_\_\_\_

Fax # \_\_\_\_\_ e-mail \_\_\_\_\_

Position/Title \_\_\_\_\_

**NOTE:**

*After ARIEL Connections has sent you a letter confirming all arrangements, a cancellation fee of 25% of the payment will be assessed on the party who cancels the engagement. The canceling party will also be responsible for any non-refundable airfare costs.*

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**All items with \*\* are issues that MUST be discussed prior to submission of this form.**

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**After form completion mail to:**

ARIEL Connections ☞ P. O. Box 22 ☞ Royal Oak, MI 48068-0022

**Or Fax to:** 248 355-3933

**Questions call us at**

☞ Southeast Michigan 248 355-3949

Toll Free 866 280-3378

☞ Email: [brenda.jenkins@ameritech.net](mailto:brenda.jenkins@ameritech.net) ☞ Website: [www.ariel-connections.com](http://www.ariel-connections.com)